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FACSIMILE TRANSMITTAL SHEET

To: Commissioner for Patents

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FACSIMILE NUMBER: 703.872.9306

**CONFIRMATION
TELEPHONE:**

FROM: Mark J. Marcelli

DIRECT DIAL: 619.744.2243

DATE: June 21, 2005

USER NUMBER:

FILE NUMBER: TS00-251 (N1280-01080)

**TOTAL # OF PAGES:
(INCLUDING COVERSHEET)**

MESSAGE: Attached please find Response to Office Action Dated March 23, 2005.

NOTE: Original will not follow

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PTO/SG/21 (08-04)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/993,087
Filing Date	11/14/2001
First Named Inventor	Kuo-Chen Lin
Art Unit	2672
Examiner Name	Motilewa A. Good-Johnson
Attorney Docket Number	TS00-251 (N1280-01080)

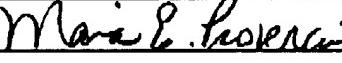
ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Duane Morris LLP		
Signature			
Printed name	Mark J. Marcelli		
Date	June 21, 2005	Reg. No.	36,593

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Maria E. Provencio	Date	June 21, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04)

Approved for use through 07/31/2008. OMB 0651-0032

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 250.00)

Complete If Known	
Application Number	09/993,067
Filing Date	November 14, 2001
First Named Inventor	Kuo-Chen Lin
Examiner Name	Motilewa A. Good-Johnson
Art Unit	2672
Attorney Docket No.	TS00-251 (N1280-01080)

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number 04-1679 Deposit Account Name Duane Morris LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity Fee (\$)

Fee (\$)

Fee (\$)

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Fee (\$)

Fee (\$)

Fee (\$)

Multiple dependent claims

Fee (\$)

Fee (\$)

Fee (\$)

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
21	- 20 or HP = 1	x 50.00	= \$50.00

HP = highest number of total claims paid for, if greater than 20

Multiple Dependent Claims

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
4	- 3 or HP = 1	x 200.00	= \$200.00

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	- 100 = _____ / 50 = _____ (round up to a whole number)	xx	_____	= _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: _____

Fee Paid (\$)

SUBMITTED BY		Registration No. (Attorney/Agent)	Telephone
Signature		36,593	619-744-2243
Name (Print/Type)	Mark J. Marcelli		Date June 21, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Appln. No. 09/993,067
 Amendment dated June 21, 2005
 Reply to Office action of March 23, 2004

Attorney Docket No.: TS00-251
 Atty Ref.: N1280-01080

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 09/993,067

Examiner: Motilewa A. Good-Johnson

Applicant: Kuo-Chen Lin et al.

Art Unit: 2672

Title: A METHOD AND APPARATUS
 FOR DISPLAYING PRODUCTION
 DATA FOR IMPROVED
 MANUFACTURING DECISION
 MAKING

Confirmation No.: 7217

Atty. Docket No.: TS00-251

Atty. Ref. No.: N1280-01080

Filed: November 14, 2001

06/23/2005 EFLORES 00000108 041679 09993067
 01 FC:1202 50.00 DA
 02 FC:1201 200.00 DA

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 shown below for the Commissioner for Patents, P.O. Box
 1450, Alexandria, VA 22313-1450.

June 21, 2005

Date

Maria E. Provencio

Maria E. Provencio

Commissioner for Patents and Trademark
MAILSTOP No-Fee Amendment
 P.O. Box 1450
 Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION DATED MARCH 23, 2005

Dear Sir:

In response to the Office Action mailed on March 23, 2005, Applicants respectfully request re-Examination and reconsideration of the application based on the amendments and remarks provided.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 8 of this paper.